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## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Mark S. Chang et al.

Serial No.: 09/539,458

Filed: March 30, 2000

Group Art Unit: 2814

Before the Examiner: Pham, H.

Title: METHOD AND SYSTEM FOR PROVIDING CONTACT TO  
A FIRST POLYSILICON LAYER IN A FLASH MEMORY  
DEVICE

**REPLY UNDER 37 C.F.R. § 1.116**

Mail Stop AF  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action having a mailing date of January 28, 2005 (Paper No. 19), having a three-month shortened statutory period for response set to expire on April 28, 2005, please reconsider the rejections of the claims in view of the following remarks:

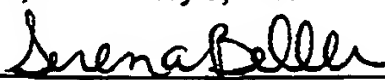
**Amendments to the Claims** are reflected in the listing of claims which begin on page 2 of this paper.

**Remarks** begin on page 6 of this paper.

02/17/2005 GSTANLEY 00000003 010365 095394 **CERTIFICATION UNDER 37 C.F.R. § 1.8**

01 FC:1201

200.00 DA  
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450, on February 8, 2005.

  
Signature

Serena Beller  
(Printed name of person certifying)

# PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

09/539,458

## CLAIMS AS FILED - PART I

|                                  | (Column 1)   | (Column 2)               |
|----------------------------------|--------------|--------------------------|
| TOTAL CLAIMS                     |              |                          |
| FOR                              | NUMBER FILED | NUMBER EXTRA             |
| TOTAL CHARGEABLE CLAIMS          | minus 20=    | *                        |
| INDEPENDENT CLAIMS               | minus 3=     | *                        |
| MULTIPLE DEPENDENT CLAIM PRESENT |              | <input type="checkbox"/> |

SMALL ENTITY  
TYPE ☐

OR  
OTHER THAN  
SMALL ENTITY

| RATE      | FEE    |
|-----------|--------|
| BASIC FEE | 370.00 |
| X\$ 9=    |        |
| X42=      |        |
| +140=     |        |
| TOTAL     |        |

| RATE      | FEE    |
|-----------|--------|
| BASIC FEE | 740.00 |
| X\$18=    |        |
| X84=      |        |
| +280=     |        |
| TOTAL     |        |

\* If the difference in column 1 is less than zero, enter "0" in column 2

## CLAIMS AS AMENDED - PART II

|  | (Column 1)                                | (Column 2)                                  | (Column 3)               |
|--|---|---|--------------------------|
| AMENDMENT A                                    | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA         |
| Total  | * 16                                      | Minus                                       | ** 20 = -                |
| Independent                                    | * 2                                       | Minus                                       | *** 3 = -                |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |   | <input type="checkbox"/> |

SMALL ENTITY

OR  
OTHER THAN  
SMALL ENTITY

| RATE                | ADDI-<br>TIONAL<br>FEE |
|---------------------|------------------------|
| X\$ 9=              |                        |
| X42=                |                        |
| +140=               |                        |
| TOTAL<br>ADDIT. FEE |                        |

| RATE                | ADDI-<br>TIONAL<br>FEE |
|---------------------|------------------------|
| X\$18=              | -                      |
| X84=                | -                      |
| +280=               | -                      |
| TOTAL<br>ADDIT. FEE | -                      |

|  | (Column 1)                                | (Column 2)                                  | (Column 3)               |
|--|---|---|--------------------------|
| AMENDMENT B                                    | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA         |
| Total  | * 18                                      | Minus                                       | ** 20 = -                |
| Independent                                    | * 3                                       | Minus                                       | *** 3 = -                |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |   | <input type="checkbox"/> |

| RATE                | ADDI-<br>TIONAL<br>FEE |
|---------------------|------------------------|
| X\$ 9=              |                        |
| X42=                |                        |
| +140=               |                        |
| TOTAL<br>ADDIT. FEE |                        |

| RATE                | ADDI-<br>TIONAL<br>FEE |
|---------------------|------------------------|
| X\$18=              |                        |
| X84=                |                        |
| +280=               |                        |
| TOTAL<br>ADDIT. FEE |                        |

2/11/05 H/E

|  | (Column 1)                                | (Column 2)                                  | (Column 3)               |
|--|---|---|--------------------------|
| AMENDMENT C                                    | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA         |
| Total  | * 17                                      | Minus                                       | ** 20 =                  |
| Independent                                    | * 4                                       | Minus                                       | *** 3 = 1                |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |   | <input type="checkbox"/> |

| RATE                | ADDI-<br>TIONAL<br>FEE |
|---------------------|------------------------|
| X\$ 9=              |                        |
| X42=                |                        |
| +140=               |                        |
| TOTAL<br>ADDIT. FEE |                        |

| RATE                               | ADDI-<br>TIONAL<br>FEE |
|------------------------------------|------------------------|
| <del>50</del><br><del>X\$18=</del> |                        |
| <del>200</del><br><del>X84=</del>  | 200                    |
| +280=                              |                        |
| TOTAL<br>ADDIT. FEE                | 200                    |

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  
 \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  
 \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.